OIPE 128

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PTO/SB/21 (09-04)

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FORM	

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Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation of POA, Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Transmittal Form (1 page); Reply to Missing Parts/ 2. Revocation of Power of Attorney With Power of Attorney And Incomplete Application Change Of Correspondence Address Form (1 page); Reply to Missing Parts under 37 CFR 1.52 or 1.53 3. Postcard. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name DUNLAP, CODDING & ROGERS, P.C. Signature Printed name Kathryn L. Hester, Ph.D.

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: "SENT BY EXPRESS MAIL NO. EV 889053998 US, DATED 09/28/2007*" Signature Typed or printed name Kathryn L. Hester, Ph.D. Date 09/28/2007

09/28/2007

Reg. No.

46,768

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Application Number	09/852,958
Filing Date	05/10/2001
First Named Inventor	David Sirbasku
Art Unit	1642
Examiner Name	S. Unger
Attorney Docket Number	7219.007

I hereby revoke all previous powers of attorney given in the above-identified application.										
A Power of Attorney is submitted herewith.										
OR										
I hereby appoint the practitioners associated with the Custom					omer Ni	umber:	30589			
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I am the: ✓ Applicant/Inventor.										
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)										
		SIGNATUR	RE of Applicant	or As	signee	of Record]			
Signature	L	and 6 Set	Best							
Name	David Sirbasku									
Date		09/27/2007 Telephone (972) 550-0310					50-0310			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.										
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